Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C					ssification	Population	Owner Type	Primary Source
CT0999043 TILCON CONNECTICUT INC NORTH BRANFORD						38	Р	GW
Local Address (v	vhere applicable)	Service	Resider	itial	Commerci	al Industri	al Combine	ed Agricultural
ROUTE 22 & 80		Connections	1					

Towns Served: NORTH BRANFORD			
Monitori	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	00600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

CT0999043	TILCON CONNECTICUT INC NORTH BRANFORD	NTNC	38	P	GW				
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source				
	Water Quality Monitoring and Con	npliance S	Schedul	e					
	Connecticut Department of Public Health Drinking water Section								

Connections

Service

ar a CD (latter Haralth, Date late a Marca Coart

Residential Commercial

1

Industrial

Combined

Agricultural

Towns Sarvad: NODTH DRANEODD

Local Address (where applicable)

ROUTE 22 & 80

Towns Served: NORTH BRANFORD								
Monitoring Requirements								
Water System Facility: ENTRY POINT (WSF ID: 00700)								
Organic Chemicals (VOCS)		1 r	outine (RT) per year					
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status					
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete					
	1/1/19 - 12/31/19							
	1/1/20 - 12/31/20							
Other Com	nnliance Schedules							

Other Compliance 3	ciledules		
Compliance Schedule Activity	Due Date	Achieved Date	
CROSS CONNECTION SURVEY REPORT	3/1/2019		
RESPOND TO SANITARY SURVEY	3/30/2019		

	Wa	iter System Facili	ty and Sampling P	oint Ir	nventoi	ſy		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		MW001	SHOP MENS ROOM	Α	Υ	2	Υ	
		MW002	SHOP WOMANS ROOM	Α	Υ	2		
		MW003	LUBE AREA SINK	Α	Υ	2		
		MW004	FAUCET #1	Α	Υ	2		
		MW005	FAUCET #2	Α	Υ	2		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10481	WELL #1	2	WELL	Α				
50190	PRESSURE TANK							

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYS	TEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
LAFRAMBOISE, PAUL F.	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	9/30/2021
		WATER TREATMENT PLANT OPERATOR - CLASS II	9/30/2021
LAFRAMBOISE, JEFFREY	ASSIGNED OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS I	12/31/2020

			Co	ontact Inf	ormation				
Name			Organization	1	Job Title				
Mr. Thomas W. Dre	ennen	Tilcon Conne	ecticut, Inc.		Cfo And Secretary				
Mailing Address Lin	e One		Mailing Addr	ddress Line Two			City	State	Zip Code
642 Black Rock Ave	nue					New Britain CT			06052
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Emergency Phone Email Address		·	

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

C	onnecticut	Depa	irtment of	Public 1	Health	Drir	ıking	Water	Section	
	Wate	r Qua	lity Monite	oring ar	nd Con	nplia	nce S	chedul	le	
PWS ID P	D PWS Name							Population	Owner Type	Primary Source
СТ0999043 Т	TO999043 TILCON CONNECTICUT INC NORTH BRANFORD							38	Р	GW
Local Address (wh		Service	Resider	ntial Co	mmercia	al Industri	al Combin	ed Agricultural		
ROUTE 22 & 80				Connection	s 1					
Towns Served: NO	RTH BRANFORD					·		·		
Contact Role(s):	egal Contact									
Name			Or	ganization					Job Titl	e
Mr. Chris Costello			Til	Tilcon Connecticut Inc				Env Mngr		
Mailing Address Li	ne One		Mailing Address	Line Two				City	State	Zip Code
642 Blackrock Ave							New Britain CT 0605			06050
Business Phone	Extension	Fax	Mobil	e Phone	Emergency	/ Phone	Email A	ddress	·	
860-224-6048			203-2	14-9092			ccostel	lo@tillcon-i	nc.com	
Contact Role(s):	Administrative Co	ntact	· · · · · · · · · · · · · · · · · · ·				•			

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C					ssification	Population	Owner Type	Primary Source
СТ0990713	5 ARDSLEY AVENUE				NTNC	50	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
5 ARDSLEY AVENUE		Connections	2					

Towns Served: NORTH BRANFORD			
Monitoring Re	quirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)			
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/20	6/1-9/30	
	1/1/21 - 12/31/23	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C					ssification	Population	Owner Type	Primary Source
CT0990713	5 ARDSLEY AVENUE				NTNC	50	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
5 ARDSLEY AVENUE		Connections	2					

Towns Served: NORTH BRANFORD

Other Compliance Schedules								
Compliance Schedule Activity	Due Date	Achieved Date						
CROSS CONNECTION EXEMPTION	3/1/2024							

	Water System Facility and Sampling Point Inventory									
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	А	Υ					
		AP-01	DR. OFFICE SINK #1	1		2				
		AP-02	FRONT TODLER SINK	Α	Υ	2	Υ			
		AP-03	STAFF KITCHEN SINK	Α	Υ	2	Υ			
		AP-04	DAYCARE BOYS LAV	Α	Υ	2	Υ			
		AP-05	DAYCARE GIRLS LAV	Α	Υ	2	Υ			
		AP-06	BACK TODLER SINK	Α	Υ	2	Υ			
		AP-08	PRE SCH CLASS SINK	Α	Υ	2	Υ			
		AP-09	INF BABY RM SINK	Α	Υ	2	Υ			
		AP-10	STAFF BATH SINK	Α	Υ	2	Υ			
		AP-11	CLUB NAP KIT SINK 1	Α	Υ	2	Υ			
		AP-12	CLUB NAP KIT SINK 2	Α	Υ	2	Υ			
		AP-13	CLUB NAP BATH 1	Α	Υ	2	Υ			
		AP-14	CLUB NAP HAND SINK	Α	Υ	2	Υ			
		AP-15	CLUB NAP BATH 2	Α	Υ	2	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α						
		UPSTREAM	WITHIN 5 SERVICE CON	Α						
00700	ENTRY POINT	3	ENTRY POINT	Α						
10774	WELL 1	2	WELL 1	Α						

Certified Operator Information Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600) Facility Classification: SMALL WATER SYSTEM Operator Name Operator Type Certification(s) Expiration ROWLEY, BRENDAN CHIEF OPERATOR DISTRIBUTION SYSTEM OPERATOR - CLASS I 12/31/2019 WATER TREATMENT PLANT OPERATOR - CLASS II 12/31/2019

			Co	ontact Inf	ormation				
Name		Organization	า	Job Title					
Mr. Mario Simoni				Alm Realty 0	Group	Member			
Mailing Address Line One Mailing Addr				ess Line Two		City		State	Zip Code
199 White Birch Road						East Har	npton	СТ	06424
Business Phone	Extension	Fax	Мо	bile Phone	Emergency Phone	Email Ad	ddress		
860-267-7335					860-267-1106				
Contact Role(s): Le	egal Contact								

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section												
	Wat	ter Qua	lity Mo	nito	oring a	nd Cor	nplia	ance S	Schedu	le		
PWS ID	PWS Name Classification Population Owner Type Primary Sour											ry Source
СТ0990713	ARDSLEY AVEN	IUE					N	TNC	50	Р	(GW
Local Address (wh		Service	Reside	ntial C	ommerci	al Industr	ial Combi	ned Ag	ricultural			
5 ARDSLEY AVENU		Connection	ns 2									
Towns Served: NO	ORTH BRANFOR)							,			
Name				Or	ganization					Job Ti	:le	
Ms. Lisa Simoni				5 <i>A</i>	5 Ardsley Ave, LLC Property Manager							
Mailing Address L	ine One		Mailing Ad	ddress	Line Two			City State Zip			Code	
56 Spellman Poin	t Rd							East H	East Hampton		00	6424
Business Phone Extension Fax Mobil				Mobil	e Phone	Emergency Phone Email Address						
860-267-7335	860-267-7867 860-71						5-0141	lisam9	876@yahoo	o.com		
Contact Role(s):	Administrative	Contact, Ow	ner		<u> </u>			1				

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule